



# LETTER OF RECOMMENDATION

To the **applicant:** Type or print your name below.

Name of applicant \_\_\_\_\_  
 (Last) (First) (Middle/Maiden)

I hereby  do  do not waive my right to have access to my letters of recommendation. \_\_\_\_\_  
 Signature of applicant

To the **individual completing this form:**

The person whose name appears above has applied for admission to Salem College. Please answer the questions below in as specific and candid a manner as possible, particularly noting maturity, purposefulness, and initiative. When complete, place the recommendation in the envelope addressed to the candidate, write your name across the seal, and return it to the candidate. Your comments will not be disclosed to the applicant and will be available only to those involved in our admission decision process. Your signature across the seal of the envelope supplied ensures that the letter is confidential.

Name of the individual completing this form \_\_\_\_\_

Position/Title \_\_\_\_\_ Organization/Firm \_\_\_\_\_

Your comments will be an important factor in the admission decision.

- How long have you known the applicant? \_\_\_\_\_
- How would you rate the applicant with respect to the following qualities:

	Below Average	Average	Good	Very Good	Outstanding	Not Observed
<i>Intellectual ability</i>						
<i>Organizational skills (plans and organizes well)</i>						
<i>Leadership potential</i>						
<i>Responsibility (dependable; accepts responsibility)</i>						
<i>Cooperation/Ability to get along well with others</i>						
<i>Motivation/Initiative</i>						
<i>Quantity of work (does more than expected)</i>						
<i>Quality of work (accurate, thorough)</i>						
<i>Written skills</i>						
<i>Oral skills</i>						

(Over)

3. Under what circumstances have you known the applicant?
4. What do you consider the applicant's most outstanding talents, skills, or characteristics?
5. What are the applicant's chief liabilities or weaknesses?
6. Will this person be able to handle the demands of college? Please explain.
7. The admission committee would appreciate any additional statement you may wish to make concerning the applicant's capacity for undergraduate work.
8. Please check one of the following boxes so that it matches what you have said above.
- strongly recommend
  - recommend
  - recommend with some reservations
  - do not recommend
- that this applicant be admitted to Salem College

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Signature *(of person completing this recommendation form)*

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Date